

This Page Is Inserted by IFW Operations
and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

**As rescanning documents *will not* correct images,
please do not report the images to the
Image Problem Mailbox.**

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

PCT/EP 00 / 05835

International Application No.

23 JUN 2000

International Filing Date

(23. 06. 2000)

EUROPEAN PATENT OFFICE

PCT INTERNATIONAL APPLICATION

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum)

CL/V -31010A/CVE 64

Box No. I TITLE OF INVENTION	
UV-illumination device	
Box No. II APPLICANT	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
Novartis AG Schwarzwaldallee 215 4058 Basel CH	
<input type="checkbox"/> This person is also inventor	
Telephone No. +41 61 324 11 11	
Facsimile No. +41 61 322 75 32	
Teleprinter No.	
State (that is, country) of nationality: CH	State (that is, country) of residence: CH
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input checked="" type="checkbox"/> the States indicated in the Supplemental Box	
Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	
Novartis-Erfindungen Verwaltungsgesellschaft m.b.H. Brunner Strasse 59 1230 Vienna AT	
This person is: <input checked="" type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
State (that is, country) of nationality: AT	State (that is, country) of residence: AT
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input checked="" type="checkbox"/> the States indicated in the Supplemental Box	
<input checked="" type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)	
BECKER, Konrad Novartis AG Corporate Intellectual Property Patent & Trademark Department 4002 Bas l CH	
Telephone No. +41 61 324 11 11	
Facsimile No. +41 61 322 75 32	
Teleprinter No.	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

Continuation of Box No. III

FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

HEINRICH, Axel
Aylesbury Farms
6115 Abbotts Bridge Road, Apartment # 1409
Duluth, GA 30097
US

This person is:

- ☐ applicant only
☒ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

DE

State (that is, country) of residence:

US

This person is applicant for the purposes of:

☐

all designated States

☐

all designated States except the United States of America

☒

the United States of America only

☐

the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

MÜLLER, Achim
Kolpingstrasse 44A
63762 Grossostheim
DE

This person is:

- ☐ applicant only
☒ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

DE

State (that is, country) of residence:

DE

This person is applicant for the purposes of:

☐

all designated States

☐

all designated States except the United States of America

☒

the United States of America only

☐

the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

SEIFERLING, Bernhard
Dr. Wohlfahrt Strasse 6
63773 Goldbach
DE

This person is:

- ☐ applicant only
☒ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

DE

State (that is, country) of residence:

DE

This person is applicant for the purposes of:

☐

all designated States

☐

all designated States except the United States of America

☒

the United States of America only

☐

the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- ☐ applicant only
☐ applicant and inventor
☐ inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of:

☐

all designated States

☐

all designated States except the United States of America

☐

the United States of America only

☐

the States indicated in the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

Box No.V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

Regional Patent

- ☒ AP ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT
- ☒ EA Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT
- ☒ EP European Patent: AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, CY Cyprus, DE Germany, DK Denmark, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT
- ☒ OA OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line).....

National Patent (if other kind of protection or treatment desired, specify on dotted line):

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> AE | United Arab Emirates | <input checked="" type="checkbox"/> LR | Liberia..... |
| <input checked="" type="checkbox"/> AL | Albania..... | <input checked="" type="checkbox"/> LS | Lesotho..... |
| <input checked="" type="checkbox"/> AM | Armenia..... | <input checked="" type="checkbox"/> LT | Lithuania..... |
| <input checked="" type="checkbox"/> AT | Austria..... | <input checked="" type="checkbox"/> LU | Luxembourg..... |
| <input checked="" type="checkbox"/> AU | Australia..... | <input checked="" type="checkbox"/> LV | Latvia..... |
| <input checked="" type="checkbox"/> AZ | Azerbaijan..... | <input checked="" type="checkbox"/> MA | Morocco..... |
| <input checked="" type="checkbox"/> BA | Bosnia and Herzegovina..... | <input checked="" type="checkbox"/> MD | Republic of Moldova..... |
| <input checked="" type="checkbox"/> BB | Barbados..... | <input checked="" type="checkbox"/> MG | Madagascar..... |
| <input checked="" type="checkbox"/> BG | Bulgaria..... | <input checked="" type="checkbox"/> MK | The former Yugoslav Republic of Macedonia..... |
| <input checked="" type="checkbox"/> BR | Brazil..... | | |
| <input checked="" type="checkbox"/> BY | Belarus..... | <input checked="" type="checkbox"/> MN | Mongolia..... |
| <input checked="" type="checkbox"/> CA | Canada..... | <input checked="" type="checkbox"/> MW | Malawi..... |
| <input checked="" type="checkbox"/> CH und LI | Switzerland and Liechtenstein | <input checked="" type="checkbox"/> MX | Mexico..... |
| <input checked="" type="checkbox"/> CN | China..... | <input checked="" type="checkbox"/> NO | Norway..... |
| <input checked="" type="checkbox"/> CR | Costa Rica | <input checked="" type="checkbox"/> NZ | New Zealand..... |
| <input checked="" type="checkbox"/> CU | Cuba..... | <input checked="" type="checkbox"/> PL | Poland..... |
| <input checked="" type="checkbox"/> CZ | Czech Republic..... | <input checked="" type="checkbox"/> PT | Portugal..... |
| <input checked="" type="checkbox"/> DE | Germany..... | <input checked="" type="checkbox"/> RO | Romania..... |
| <input checked="" type="checkbox"/> DK | Denmark..... | <input checked="" type="checkbox"/> RU | Russian Federation..... |
| <input checked="" type="checkbox"/> DM | Dominica..... | <input checked="" type="checkbox"/> SD | Sudan..... |
| <input checked="" type="checkbox"/> EE | Estonia..... | <input checked="" type="checkbox"/> SE | Sweden..... |
| <input checked="" type="checkbox"/> ES | Spain..... | <input checked="" type="checkbox"/> SG | Singapore..... |
| <input checked="" type="checkbox"/> FI | Finland..... | <input checked="" type="checkbox"/> SI | Slovenia..... |
| <input checked="" type="checkbox"/> GB | United Kingdom..... | <input checked="" type="checkbox"/> SK | Slovakia..... |
| <input checked="" type="checkbox"/> GD | Grenada..... | <input checked="" type="checkbox"/> SL | Sierra Leone..... |
| <input checked="" type="checkbox"/> GE | Georgia..... | <input checked="" type="checkbox"/> TJ | Tajikistan..... |
| <input checked="" type="checkbox"/> GH | Ghana..... | <input checked="" type="checkbox"/> TM | Turkmenistan..... |
| <input checked="" type="checkbox"/> GM | Gambia..... | <input checked="" type="checkbox"/> TR | Turkey..... |
| <input checked="" type="checkbox"/> HR | Croatia..... | <input checked="" type="checkbox"/> TT | Trinidad and Tobago..... |
| <input checked="" type="checkbox"/> HU | Hungary..... | <input checked="" type="checkbox"/> TZ | United Republic of Tanzania..... |
| <input checked="" type="checkbox"/> ID | Indonesia..... | <input checked="" type="checkbox"/> UA | Ukraine..... |
| <input checked="" type="checkbox"/> IL | Israel..... | <input checked="" type="checkbox"/> UG | Uganda..... |
| <input checked="" type="checkbox"/> IN | India..... | <input checked="" type="checkbox"/> US | United States of America..... |
| <input checked="" type="checkbox"/> IS | Iceland..... | | |
| <input checked="" type="checkbox"/> JP | Japan..... | <input checked="" type="checkbox"/> UZ | Uzbekistan..... |
| <input checked="" type="checkbox"/> KE | Kenya..... | <input checked="" type="checkbox"/> VN | Viet Nam..... |
| <input checked="" type="checkbox"/> KG | Kyrgyzstan..... | <input checked="" type="checkbox"/> YU | Yugoslavia..... |
| <input checked="" type="checkbox"/> KP | Democratic People's Republic of Korea..... | <input checked="" type="checkbox"/> ZA | South Africa..... |
| | | <input checked="" type="checkbox"/> ZW | Zimbabwe..... |
| <input checked="" type="checkbox"/> KR | Republic of Korea..... | | |
| <input checked="" type="checkbox"/> KZ | Kazakhstan..... | | |
| <input checked="" type="checkbox"/> LC | Saint Lucia..... | | |
| <input checked="" type="checkbox"/> LK | Sri Lanka..... | | |

Check-boxes reserved for designating States which have become party to the PCT after issuance of this sheet:

- ☒ DZ Algeria.....
- ☒ AG Antigua and Barbuda.....
- ☒ MZ Mozambique.....
- ☒ BZ Belize (from 17. June 2000).....

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Designation Statement.

If the Supplemental Box is not used, this sheet should not be included in the request.

(i) if more than two persons are involved as applicants and/or inventors and no "continuation sheet" is available: in such case, write "Continuation of Box No. III" and indicate for each additional person the same type of information as required in Box No. III. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below;

(iii) if, in Box No. II or in any of the sub-boxes of Box No. III, the inventor or the inventor/applicant is not inventor for the purposes of all designated States or for the purposes of the United States of America: in such case, write "Continuation of Box No. II" or "Continuation of Box No. III" or "Continuation of Boxes No. II and No. III" (as the case may be), indicate the name of the inventor(s) and, next to (each) such name, the State(s) (and/or, where applicable, ARIPO, Eurasian, European or OAPI patent) for the purposes of which the named person is inventor;


(v) if, in Box No. V, the name of any State (or OAPI) is accompanied by the indication "patent of addition," or "certificate of addition," or if, in Box No. V, the name of the United States of America is accompanied by an indication "continuation" or "continuation-in-part": in such case, write "Continuation of Box No. V" and the name of each State involved (or OAPI), and after the name of each such State (or OAPI), the number of the parent title or parent application and the date of grant of the parent title or filing of the parent application;

(vii) if, in Box No. VI, the earlier application is an ARIPO application: in such case, write "Continuation of Box No. VI", specify the number of the item corresponding to that earlier application and indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed.

3. If the applicant claims, in respect of any designated Office, the benefits of provisions of the national law concerning non-prejudicial disclosures or exceptions to lack of novelty: in such case, write "Statement concerning non-prejudicial disclosures or exceptions to lack of novelty" and furnish that statement below.

**Novartis AG is applicant for all designated States with the exception of: AT (Austria)
US (USA)**

Novartis-Erfindungen Verwaltungsgesellschaft m.b.H. is applicant for AT (Austria) only.

Box No. VI PRIORITY CLAIM		<input type="checkbox"/> Further priority claims are indicated in the Supplemental Box		
Filing Date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country	regional application: regional Office	international application: receiving Office
item (1) 25 June 1999 (25.06.99)	99112256.5		EP	
item (2)				
item (3)				
<input type="checkbox"/> The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as item(s):				
* Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.				
Box No. VII INTERNATIONAL SEARCHING AUTHORITY				
Choice of International Searching Authority (ISA) (If two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):		Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):		
ISA/		Date (day/month/year) Number Country (or regional Office)		
Box No. VIII CHECK LIST; LANGUAGE OF FILING				
This international application contains the following number of sheets:		This international application is accompanied by the item(s) marked below:		
request :	5	1. <input checked="" type="checkbox"/> fee calculation sheet		
description (excluding sequence listing part) :	6	2. <input checked="" type="checkbox"/> separate signed power of attorney		
claims :	2	3. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any: AV 36671 + 37586		
abstract :	1	4. <input type="checkbox"/> statement explaining lack of signature		
drawings :	3 ^a [A] ^{aa}	5. <input checked="" type="checkbox"/> priority document(s) identified in Box No VI as item(s): (1)		
sequence listing part of description :	-	6. <input type="checkbox"/> translation of international application into (language):		
Total number of sheets :	17 ^a [18] ^{aa}	7. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material		
		8. <input type="checkbox"/> nucleotide and/or amino acid sequence listing in computer readable form		
		9. <input type="checkbox"/> other (specify):		
Figure of the drawings which should accompany the abstract: -		Language of filing of the international application: English		
Box No. IX SIGNATURE OF APPLICANT OR AGENT				
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request)				
In the name of the applicants The representative  30.05.2000 BECKER, Konrad, AV 36671 + 37586				

For receiving Office use only		2. Drawings: <input checked="" type="checkbox"/> received <input type="checkbox"/> not received
1. Date of actual receipt of the purported international application:	(23. 06. 00) 23 JUN 2000	
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA/	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid.	

For International Bureau use only

Date of receipt of the record copy